Mental Health Transformation Council

Meeting in Waterbury – September 24, 2007

MINUTES

Present:

Michael Hartman, Marty Roberts, Linda Corey, Kitty Gallagher, Paul Dupre, Ken Libertoff, Larry Lewack, Ron Smith, Jill Olson, Sally Parrish, Bill McMains, Judy Rosenstreich, Ed Paquin, Harvey Peck, David Gallagher, Beth Tanzman, Leah Matteson, Jeff Rothenberg, Jean New, Anne Donahue, Marlys Waller, Theresa Wood, Terry Rowe, Tom Simpatico

Mental Health Commissioner Michael Hartman welcomed everyone to the first meeting of the Transformation Council. Following introductions, Michael shared his thoughts on the composition and purpose of the Council. He sees the Council as not only family and consumer members but also others to encourage full and open discussions of significant issues. Among these issues are:

- What is the spirit and philosophy of DMH in terms of system changes ahead of us?
- What size and scope are the successor programs to VSH? What proportions will serve acute care needs and non-acute recovery-oriented environments?
- What elements of the legal system and processes keep people in VSH?
- o How will we meet the challenges of state hospital accreditation and restore CMS recognition to allow for federal financial participation?
- What is happening with the Futures project?
- How will we provide mental health services to people who are incarcerated and *should* they be incarcerated if they have mental illness?
- What do we need to do to improve the entire system of care out of some very good components?

Michael discussed the need for this forum to provide input on current policy questions, commenting that everything is on the table for discussion. He has sought conversation during visits to community hospitals, Designated Agencies, standing committees, and individuals. He plans to have some meetings in locations other than Burlington and Waterbury as a way to hear from mental health stakeholders in Southern Vermont, and other more distant areas. Several Council members suggested White River Junction as a place that was accessible.

Michael stated that he is not looking for consensus positions on issues but rather discussion of what we are trying to do for mental health in Vermont. His intent is to provide an environment conducive to discussion without necessarily voting on issues.

Going around the table, members of the Council identified issues that bear discussion by the Transformation Council. Varied opinions were expressed, including...

- 1. discharge planning should include the consumer
- 2. if you do the crime, you should do time whether or not you're a consumer
- 3. work on stigma should include encouragement of media to print positive things
- 4. people in prison with mental health issues should be in a mental health facility
- 5. a new facility should emphasize recovery
- 6. representation on the Council of people with developmental disabilities is good
- 7. need beds set aside for long-term care
- 8. another priority is skill training for people to get back into the community
- 9. we forget that there is a family involved, which leaves families feeling isolated because people do not listen to us
- 10. educate families as to what is available for support and connections
- 11. maintain focus on core challenges: closing VSH; erosion that has occurred in the system of services that are not required such as outpatient services; traumainformed, community based and recovery oriented services free from coercion
- 12. continue to stay on track with values that have been accepted by MH community

Also significant were suggestions concerning how the Transformation Council would function and the transparency of the process. Members asked for notice, agendas and locations of meetings; refreshments; positive meetings about getting things done; contact information of Council members; and an ethic within the group that input would be welcome and heard. White River Junction would improve statewide participation, based on the experience of some members involved in meeting planning. Another suggestion was to hold a series of public engagement meetings across the state to educate people about mental health.

A parallel process to discuss children's mental health was suggested.

Thanking people for their comments, Michael stated that the group may want to bring in people to facilitate our information gathering to support fruitful discussions on subjects such as Act 114. Michael reflected on the challenges of working within the public policy framework of the governor and the legislature. He referenced the costs of operating VSH where half of the patients do not require that level of psychiatric care. The mental health and substance abuse needs of people in Correctional facilities is a major concern.

People also were mindful of the positive developments in the last several years, citing the big budget increase of \$462,000 for housing subsidies and supports and the expansion of consumer involvement in various capacities.

For the next Council meeting on October 22, there was interest in a couple of questions:

- What indicators should we be discovering or promoting?
- What are the challenges facing the mental health system?

The meeting adjourned at 3:00 p.m. SUBMITTED BY: Judy Rosenstreich